

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

Application for reinstatement for Class C Charter
Certificate from Travel Tours Unlimited, Inc of Hamlet

2201/1
2201/12
BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET

NUMBER: 2005 - 185 - T

If this is your first time filing an application with the PSC, you will not
have a Docket Number. The Commission will assign one to you. If you
have filed with the Commission before, a Docket Number was assigned
and should be entered above.

(Please type or print)

Submitted by: Bronson Medley

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Address: P.O. Box 365
Hamlet, NC 28345

Fax: (803)786-8870

Other:

Email: bronsonmedley@bellsouth.net

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Application – Class C Taxi | <input type="checkbox"/> Request to Amend Scope of Authority |
| <input type="checkbox"/> Application – Class C Charter | <input type="checkbox"/> Request to Amend Tariff (rate increase, etc.) |
| <input checked="" type="checkbox"/> Application – Class C Charter Bus | <input type="checkbox"/> Request to Amend Passenger Limit |
| <input type="checkbox"/> Application – Class C Non-Emergency | <input type="checkbox"/> Request |
| <input type="checkbox"/> Application – Class E Household Goods | <input type="checkbox"/> Exhibit |
| <input type="checkbox"/> Application – Class E Hazardous Waste | <input type="checkbox"/> Late-Filed Exhibit |
| <input type="checkbox"/> Application | <input type="checkbox"/> Letter |
| <input type="checkbox"/> Request for Extension to Comply with Order | <input type="checkbox"/> Proposed Order |
| <input type="checkbox"/> Request for Order Granting Authority to Obtain Certificate of
Public Convenience and Necessity to Be Rescinded | <input type="checkbox"/> Publisher's Affidavit |
| <input type="checkbox"/> Request for Cancellation of Certificate | <input type="checkbox"/> Reservation Letter |
| <input type="checkbox"/> Request for Suspension | <input type="checkbox"/> Response |
| <input checked="" type="checkbox"/> Request for Reinstatement | <input type="checkbox"/> Return to Petition |
| <input type="checkbox"/> Request for Name Change on Certificate | <input type="checkbox"/> Other: |

RECEIVED
PSC SC
DOCKETING DEPT

CLASS C REINSTATEMENT FORM

File the original with: Public Service Commission of South Carolina Docketing Department Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100 FAX (803) 896-5199	Mail or fax a copy to: S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815
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DATE: November 3, 2009

Please consider this an application for Reinstatement of my:

- ☐ Taxi Certificate Number _____
- ☐ Charter Certificate Number _____
- ☒ Charter Bus Certificate Number 0200
- ☐ Non-Emergency Certificate Number _____

My certificate was revoked/cancelled on OCT. 16, 2009 because INSURANCE FORM
(DATE)
'E' NOT Filed with The Commission.

I am seeking reinstatement because WE ARE STILL OPERATING IN S.C.,
The FORM 'E' IS Filed with 'ORS' OCT. 29, 2009.

Travel Tours Unlimited Inc of Hamlet BBA _____
(Name of Company) (if applicable)

Perry Williams Rd.
(Street Address)

P.O. Box 365, HAMLET NC.
(Mailing Address if different from Street Address) 28345

Hamlet NC 28345
(City, State, Zip Code)

Brownson Medley
(Signature)

(704) 975-4863
(Telephone Number)

Owner,
(Title)